

Agency Report of:  
Ceremonial Role Events and  
Ticket/Admission Distributions

A Public Document

<b>1. Agency Name</b> CITY OF INDIAN WELLS Division, Department, or Region (if applicable)  Street Address 44950 ELDORADO DRIVE Designated Agency Contact (Name, Title) RODERICK J. WOOD, INTERIM CITY MANAGER Area Code/Phone Number 760/346-2489 E-mail rwood@indianwells.com		Date Stamp	California Form <b>802</b> For Official Use Only
		<input type="checkbox"/> Amendment (Must provide explanation in Part 3.) Date of Original Filing: _____ (month, day, year)	

**2. Function, Event, or Ceremonial Role Information**

Title BNP PARIBAS OPEN TENNIS Face Value of Each Admission \$ 2,500  
Description TENNIS TOURNAMENT Date(s) 3 / 8 / 12 3 / 18 / 12

Ticket(s)/Admission(s) provided by agency? Yes ☒ No ☐ If no: \_\_\_\_\_  
Name of Source

Was the distribution to persons identified below made at the behest of an agency official?

Yes ☐ No ☒ If yes: \_\_\_\_\_  
Official's Name (Last, First) and Title

**The identity of recipient(s) and the explanation:**

Name (Last, First) or Organization (Name, Address, Description)	Number of Admission(s)/ Ticket(s)	Agency Official	<ul style="list-style-type: none"><li>Check the income box if the agency official claims admission as taxable income. If the agency official performed a ceremonial role, also provide a description.</li><li>If not income, describe the public purpose, including ceremonial roles, performed by an agency official, individual, or organization.</li></ul>
Hanson, Douglas H.	2	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	Support of City Sponsorship & Residents Income <input type="checkbox"/>
		Yes <input type="checkbox"/> No <input type="checkbox"/>	Income <input type="checkbox"/>
		Yes <input type="checkbox"/> No <input type="checkbox"/>	Income <input type="checkbox"/>
		Yes <input type="checkbox"/> No <input type="checkbox"/>	Income <input type="checkbox"/>
		Yes <input type="checkbox"/> No <input type="checkbox"/>	Income <input type="checkbox"/>

**3. Verification**

I have read and understand FPPC Regulations 18944.1 and 18942. I have verified that the distribution of admissions, set forth above,

RODERICK J. WOOD

INTERIM CITY MANAGER

Print Name

Title

4-10-12  
(month, day, year)

any additional information including amendment explanation.)